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Another plan which might be adopted, is having a loan account. This might be started and even maintained by subscription, and its object be the following. In cases where a family found it necessary to have, for the time being, a second nurse, and could not at once pay for the same, a loan for that nurse's fee, might be made to the family and paid to the organization, allowing the family to repay when possible at some future time. There are many other ideas, that might later be developed, such as a renting closet, which would take the place of the loan closet of the visiting nurse associations. Here could be kept a supply of articles that could be easily sterilized, such as blankets, sheets, water bags, douche bags, etc., and even gowns might be rented for a small sum and so add to the income of the Association, and save the family the expense of buying the otherwise unneeded supply. The plan which we have tried to roughly outline seemed to the Committee, a feasible one, which, with the help and backing in the beginning of any one of our nurses' associations, might become almost immediately self-supporting, and fill in our city a long felt and great need.

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## **THE PIONEERS OF THE NEW YORK HOSPITAL TRAINING SCHOOL**

By ADELE M. HODGSON

Graduate of the New York Hospital Training School

BEFORE we speak of ourselves, we must, for one moment, think of Florence Nightingale, the first and best and greatest of all pioneer nurses, in memory of whose services in the Crimean war, the first Training School, The Nightingale, was founded in England to begin the systematic training of women. In this country the first schools were founded in Boston and New York in 1872-1873, and our school at the New York Hospital, on West Fifteenth Street, followed in 1877. We may therefore claim a place among the pioneers.

The word defined means—one who clears the way for others, and suggests hardships and trials, calling for fortitude, energy, patience and perseverance. On that score I do not think the classes of 1879-80 can command extreme veneration or awesome respect. The way, as you see, had been cleared for us. The old New York Hospital had given place to the beautiful new building. The Governors had fully decided to have a school for gentlewomen of education, culture and good repute, who should also do the very practical work, while being instructed personally by physicians and surgeons, and a competent graduate nurse. We were

much admired, and we admired ourselves exceedingly. We met with much consideration and were not backward in making our wants and grievances known. In fact we each felt called upon to take a hand and have a voice in getting the school in running order, and at the end of three months we were ready to request the removal of the old experienced nurses retained for our benefit, feeling rebellious against them, and in our self-confidence quite capable of taking their place. It was, I am sure you will quickly see, a case of "fools rushing in" where wiser ones would count the cost. And *then* our real trials *did* come.

Two experienced women were retained for head nurses, and the widows and older ones were put in charge of the wards. Work, study, and the anxiety of responsibility began in earnest. Some of us were very young in years, fresh from country homes, knowing absolutely nothing whatever of pain and sickness. In fact without any true conception of life anyway. Utterly ignorant of the wonderful anatomy of the human frame or of physiology, we were thrust into positions of authority and responsibility, without the gradual preparation which you all receive now; without the calm, sure self-confidence which comes from helping and watching others first.

We had a term of only eighteen months, in which, while working far beyond our strength, in this new exciting, absorbing field of labor, we were expected to absorb the necessary knowledge of anatomy, physiology, and circulation, with all the science of the care of sick and injured men, and women and children, and administration of remedies added.

We were crammed with lessons and lectures at all hours, and every day. For recreation we dissected ox-eyes, cats, rats, and bandaged the convalescing patients. In addition, some of us took a course in chemistry at Cooper's Institute evenings, the Governors employing the Broadway stages to transport us. What a blessing it has been to those that came after us, that one of the graduates came back to say we must have two years in which to study, and prepare for such grave responsibilities, and, after a time, to say we must have *three* years, and more personal instruction.

You cannot wonder that many pupils were worn out by this desperate straining for rapid accumulation of exhaustive experience and knowledge, and by that our successors have profited.

While we did not have the beautiful home, with luxurious suites of rooms, reception parlors, lecture-room, and spacious dining-room, we were contented; looking forward to the work we were to do outside, and we had many a pleasant meeting together for a quiet talk, and singing in the Solarium, after the patients had left it at night. We all remem-

ber well Thanksgiving, 1878, and an entertainment we gave up there for the patients able to be carried up. There were tableaux, songs, shadow acts, and so forth, followed by dancing. And the class dinner we had in the small dining-room, each one contributing to make it a success! Not much like the receptions, fairs, and entertainments you have now.

We had to sweep and dust the wards, scour pans and bath-tub, wash dishes for the patients, and be our own waitresses in our own dining-room at first. Sometimes there were three nurses in a ward but often only two, and a night nurse had care of two wards. But with all this, we have a warm remembrance of the kind courtesy and respectful consideration exhibited towards us by the governors and superintendents of the hospital, who improved and corrected constantly as they saw these errors of judgment.

And so in that way we *did* clear the way as pioneers, until step by step the nurses have come into their present perfect home life and educational curriculum.

We did not have in those days one desperate rush in the operating-room for twelve hours every day; two or three surgeons operating in different rooms at the same time, calling imperatively "next, next" for the ones waiting their turn in the etherization room. We had no laparotomies, an amputation of a leg or arm, or breast, was a big affair. Invitations were sent out to doctors and students on postal cards. We had no typewriters. The surgeons all wore red calico gowns, and while the patients were being etherized gave us a little history of the case. They had also time to look over and correct the notes of their lectures which we took down.

I commenced by saying we do not deserve the name of pioneer, but have convinced myself that we do. Anyway, without question, the name belongs to us as private nurses, going out into cities, towns, and villages, from one end of the country to the other. Nurses were so few that we were even telegraphed for from California and Mexico. We would return from the theatre to find a cab and messenger had been standing two hours waiting, and we did not feel privileged to refuse to go, as nurses do now. We formed a habit of leaving the number of our theatre seats, or the location in church that we might be followed and called out. We had to be good, all around, versatile nurses. No specials in those days for surgery, for contagious diseases, for insane, for men, and for children, for old people and so forth, as now. We were not allowed to plead unfitted for anything, save obstetrics, in which some of us took a course later to supplement the theoretical lectures. In private nursing

we were expected to sweep and dust the room, which, even in a case of diphtheria, was often furnished with velvet carpets, heavy draperies, and upholstered furniture, which we had to do the best we could with, and afterwards fumigate with sulphur, and clean the room. The board of health will do that now and, besides, people are so educated that we find the room easy to take care of, and our full strength may be given to our real mission, nursing. Many a pioneer has broken down under private work, and people would say "Poor girl! she undertook more than she had strength for." "Well! don't you think she did? I remember well the first velvet carpet I ever swept with a broom, and not a sweeper such as we have now. It gave me a lasting dislike for such luxuries.

We were expected to nurse the entire family, servants included. I have nursed scarlet fever in one room, a child with acute illness in another, with a maid on the top floor ill at the same time, and after all had recovered and the fumigation accomplished without removing the carpets, had a serious operation on the same floor, and we had only the help of some frightened, nervous member of the family who, while we slept the two or four hours which was all a nurse needed in those days, would undo our efforts by experimenting a little on her own account, or waken us every hour to ask some trivial question. Well do I recall the terrible strain of a typhoid case. Isn't it good to know that now the doctors demand two nurses for such cases, and sometimes even three, that no one weak woman carries responsibility alone! The pioneers had no telephone to relieve the tense, anxious strain. Sometimes we were miles distant from a doctor in the country, and obliged to rack our brains at midnight to remember instructions for emergencies, climax, or sudden development of complications, never daring to leave our books behind us. We were almost in the position of young doctors without the advantage of their education, and if, after all, the patient died, the overwrought young nurse, feeling herself as Providence to her patient, blamed her own weakness and ignorance in self torture.

Now, in these blessed days, we have only, wherever we are, to step to the telephone, put the receiver to our ear and tell our perplexities to our chief who, miles away, can still take the responsibility and anxious burden from us.

We did not have all the wonderful remedies for relieving pain, for cutting short the time of suffering, or rapidly curing. We had therefore to carry a strong moral and mental support, helping to bear cheerfully and bravely what could not be taken away.

Rev. Philips Brooks said "We are all born to die." What more

noble work can we find than to make life more glad and comfortable for others, and death less to be dreaded?

The pioneers had character, *must* have had, or they would not have stood this test of years; and character only is the powerful thing to be relied upon as the foundation to put a good training on.

President Roosevelt has said "It is better to be faithful than famous." One may become famous by being faithful, but that depends upon the appreciation and recognition of others, therefore it is not in one's power to command success in that way, but all may deserve it, and enjoy their own good conscience and self-respect.

Hawthorne said "Recognition makes a man humble." The gratitude of patients has often made us feel very humble. We have striven to keep up with the rapid progressive march of surgery and medicine, and nursing ethics, and recognition makes us humble as well as proud. We see our earlier experiences through the golden or the grey mists of years that lie between. We have in mind and heart memories of those who started with us, and have fallen by the way in harness, and have gone to their rest and reward.

The pioneers can testify that it is a life of sadness and gladness. We rejoice in the tense strain, the steady pressure of the heavy burden, and then it is lifted, and we welcome the glad relief, the well-earned right to rest; and the success and gratitude make us very humble, because we know that we are only the instruments used by God.

A nurse's life is so bound up in the lives of others that our noblest achievements, our best deeds, or greatest self-sacrifice, must of necessity only be known to ourselves. What matter? We have made true friends for life. Our names are written in many hearts to whom we were not merely nurses from a big hospital, but "Mothers in Israel," saving lives from the enemy.

There was danger to the pioneer that the idea of rescue, of being useful, and necessary to others, should so take possession of her mind, that she ceased to care enough for herself, allow other talents to rust, neglect culture, lose proper and natural vanity, and thus by belittling herself defeat her object, lessen in time her powers, and interfere with her mission to bring cheer, hope and comfort.

If a woman does this in unselfish unconsciousness she will find herself a back number, laid upon the shelf as an antiquity years too soon, all her years of experience and acquired wisdom of little use. That is too bad. It should not be. Do not do it. Open the windows and look out from the atmosphere of microbes into the fields of brightness; drink of the wells of healthy joyous all-round culture, and get relaxing

recreation. We must be good to ourselves, as good and kind as we are to others. Do not monopolize all the self-sacrifice, and unselfishness. Give others a chance to become saints as well as yourselves; to cultivate some of the christian virtues, while we cultivate some of the christian graces.

It makes the class of 1879-80 feel old in experience, though not in years or spirit, to see all these new ways, to keep up by study and practice in hospitals, from time to time, with the changes, to do the new ways while still thinking of the old, so indelibly stamped upon memory by repeated practice.

We indeed congratulate those about to enter upon a three years' course, upon the way made clear for them to get a complete training before being sent out; and we cordially reach out our hands in unity of aim and interest. Only the united loyalty of different classes and nurses, to each other as a whole, will bring harmony, and the want of such harmony will cripple our influence and success as a body, and hamper each individual.

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## NURSING PROGRESS IN DENMARK \*

By MISS BODIL HELLFACH

LADIES: In reading you some facts about nursing in Denmark, I must explain that until yesterday I had supposed that a more qualified representative than I would do this, and you must excuse my lack of preparation.

Thirty years ago a few young women from the upper classes went for the first time to work in the hospitals. They met with much resistance and ill-will from the physicians and the authorities, but they worked patiently on, and so well, that this opposition soon disappeared, and more than a thousand others followed in their steps. There are now educated women in all of our great hospitals, some of which are old, others new and up-to-date, and the practical nursing in Denmark has now a high standard. The authorities have improved conditions and many hospitals have comfortable nurses' homes, the Kommune Hospital having built a fine one last year. Hours of duty have also been shortened, but we need to have matrons in our hospitals, we need regular training schools with systematic courses of training, and state registration, for now any woman can call herself a nurse and deceive the public.

In 1899 the Danish Nurses Association was started with about fifty

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\* Read at the Paris Conference, June, 1907.